

CAPITOL HILL FITNESS CENTERMEMBERSHIP POLICY

MEMBERSHIP COMMITMENT	
All members agree to maintain their member	rship in good standing for a term of 12 months. Access to the
fitness center will only occur after each person has completed their enrollment forms and paid his/her initial	
•	required to log into the front desk upon entering the fitness
center. Checks may be made out to DPH Worksite Wellness. <i>Initials</i>	
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MEMBERSHIP OPTIONS (check members	ership)
□ \$24.99/month with a 12 month membership	
\square \$34.99/month to month	
ACH draft will occur on the 15 th of	f the month PRIOR to the membership month (i.e., Jan 15 th
payment will be for February mem	
 No additional joining fees 	•
• One year fitness center fees can be	paid in full at start of membership
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CANCELLATION/TERMINATION	
You are responsible for cancelling your men	nbership if you choose not to renew after your 12-month
membership is up. Month to month member	rship may cancel at any time prior to the 10th of the previous
	If you anticipate moving, transferring, retiring or leaving the
	apitol Hill Fitness Center staff to cease your ACH payments.
	physician provides documentation that exercise must be
•	your membership for up to 180 days. Once your physician gives
-	ount will be active again. <i>Initials</i>
	_
Member Name (print legibly)	Agency
Member Signature	- Date
	
Financial Institution Name	-
2 Marie Marie Marie	
Bank Routing Number	-
Checking or Savings Account Number	

